Division of Corporations Electronic Filing Cover Sheet

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To:

Amend

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)962-3889

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LS ENGINEERING RESOURCES, LLC

Certificate of Status	0
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Page Count	04
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Corporate Filing Menu

Hélp

J. SAULSBERRY EXAMINER OCT 29 2012

FAX COVER SHEET

ТО		
COMPANY		
FAX NUMBER	18506176383	
FROM	Tony Burroughs	
DATE	2012-10-26 07:25:38 PDT	
RE	FL SOS - LZ order # 504849336	

COVER MESSAGE

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COVER LETTER

TO: Registration Section **Division of Corporations** SUBJECT: LS ENGINEERING RESOURCES, LLC (Name of Limited Liability Company) The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Barbara Dang (Name of Person) Legalzoom.com, Inc. (Firm/Company) 100 W. Broadway Suite 100 (Address) Glendale, CA 91210 (City/State and Zip Code) For further information concerning this matter, please call: at (323) 962-8600 Barbara Dang (Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for the following amount: \$55.00 Filing Fee & \$60.00 Filing Fcc, \$25.00 Filing Fee \$30,00 Filing Fee & Certificate of Status & Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy

> MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



LS ENGINEERING RESOURCES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Lia	ability Company were filed on	09/26/2012 and assigned	
Florida document number <u>L12000123036</u>	·		
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited liability company	<u>here</u> :	
Primary Recruiting Services, LLC		nd I de la	<u>-</u>
The new name must be distinguishable and end with "L.L.C."	a the words "Limited Liability Co	ompany," the designation "LLC" or the aboreviau	on
B. If amending the registered agent and/or registered agent and/or the new registered of		on our records, enter the name of the ne	e w
Name of New Registered Agent:	Noah Smith		_
New Registered Office Address:	9253 Beaver Cove		_
	(Enter Florida street address)		
	Apopka	, Florida 32703	-
	(City)	(Zip Code)	

New Registered Agent's Signature, if changing Registered Agent;

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

amending the Managers or Managing Members on our records, enter the title, name, and address of each Mana Managing Member being added or removed from our records:			
IGR = Mai IGRM = M	nager Ianaging Member		
<u>itle</u>	<u>Name</u>	Address	Type of Action
1GR_	Noah Smith	9253 Beaver Cove Apopka, Fl_32703	Add Remove
IGR_	Scott Lidfeldt	458 Forestwood Lane Maitland, FL 32751 MGR	Add Remove
GR	Brian Smith	458 Forestwood Lane Maitland, FL 32751	Add Remove
·····			Add Remove
			Add Remove
			Add Remove
If amend	ing any other information, ente	er change(s) here: (Attach additional sheets, if nec	essary.)
ated	Signature of a	member or authorized representative of a member Noah Smith	TATE OF THE POST O
		Typed or printed name of signee Page 2 of 2	~ ~

Filing Fee: \$25,00